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FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL				
OMB Number:	3235-0076			
Expires:	May 31, 2005			
Estimated average burden				
hours per response 16.				

SEC USE ONLY			
Prefix	Serial		
	l l		
DAT	TE RECEIVED		

Name of Offering Check if this 800,000 Shares of Common Stock	is an amendment and name has changed, and indicate chan	ge.)
Filing Under (Check box(es) that apply)	: □ Rule 504 □ Rule 505 ⊠ Rule 506 □ Section 4	
Type of Filing: New Filing Ar	mendment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested ab	out the issuer	07073096
Name of Issuer (check if this is an	amendment and name has changed, and indicate change.)	
MOBIBUCKS CORPORATION		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
280 Hope Street, Mountain View, CA	94041	(650) 906-3676
Address of Principal Business Operation (if different from Executive Offices)	ns (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business Mobile c	ommerce	ADACECCED
Type of Business Organization		PROUCOSED
☐ corporation☐ business trust	☐ limited partnership, already formed ☐ other ☐ limited partnership, to be formed	r (please specify): AUG 0 1 2007
Actual or Estimated Date of Incorporation of Organiz	ation: (Enter two-letter U.S. Postal Service abbreviation for	State:
	CN for Canada; FN for other foreign jurisdicti	on) O R

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A, BASIC IDENTIFICATION DATA Enter the information requested for the following: • Each promoter of the issuer, if the issuer has been organized within the past five years; • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and · Each general and managing partner of partnership issuers. Check Box(es) that Apply: □ Promoter ■ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Jensen, Donald C. L. Business or Residence Address (Number and Street, City, State, Zip Code) 6454 Whispercreek Lp. NE, Keizer, OR 97303 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Sternberg, Aaron B. Business or Residence Address (Number and Street, City, State, Zip Code) 14000 NW 29th Avenue, Vancouver, WA 98685 Check Box(es) that Apply: □ Promoter ■ Beneficial Owner ☑ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Fernandes, Jorge Business or Residence Address (Number and Street, City, State, Zip Code) 951 Echo Drive, Los Altos, CA 94024 Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) LaCount, J. Darin Business or Residence Address (Number and Street, City, State, Zip Code) 4645 NE 118th Ave., Portland, OR 97220 Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Warnick, Richard H. Business or Residence Address (Number and Street, City, State, Zip Code) 9925 72nd Avenue, Salem, OR 97305 Check Box(es) that Apply: ☑ Promoter □ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Shita, Mounir Business or Residence Address (Number and Street, City, State, Zip Code) 3057 NW Overlook Dr., Hillsboro, OR 97124 Check Box(es) that Apply: ☐ Beneficial Owner □ Promoter ■ Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Kulasooriya, Mani

280 Hope Street, Mountain View, CA 94041

Business or Residence Address (Number and Street, City, State, Zip Code)

,		A. BASIC IDEN	STIFICATION DATA				
 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 							
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner		
Full Name (Last name first, if Monvia, LLC	`individual)						
Business or Residence Addres 280 Hope Street, Mountain		reet, City, State, Zip Code)					
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner		
Full Name (Last name first, if Warnick, Harlan and Jean	individual)						
Business or Residence Address 6922 Sunnyview Rd. N.E., S		reet, City, State, Zip Code)		·			
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☑ Executive Officer	□ Director	☐ General and/or Managing Partner		
Full Name (Last name first, if Barram, David J.	individual)						
Business or Residence Address 1515 Redwood Drive, Los A	,	reet, City, State, Zip Code)					
	(Use blan	k sheet, or copy and use add	itional copies of this sheet, as	s necessary.)			

				B. 1	NFORMA	TION AB	OUT OFF	ERING					
1 Unc t	the iccuer o	old or doe	the iccuer	intend to co	ll to non s	acredited i	avectore in	thic offerin	~?	****************		Yes	No
1. nas (ilie issuei si	ola, or acce			•				•	*****************	***********		⊠
2 1111	Answer also in Appendix, Column 2, if filing under ULOE.						r	B1/4					
2. wna	2. What is the minimum investment that will be accepted from any individual?						\$ Yes	N/A No					
3. Does	the offerir	ig permit jo	int ownersl	nip of a sing	gle unit?				····			r es ⊠	[NO
4. Enter	r the infor	mation req	uested for	each pers	- on who ha	is been or	will be pa	aid or give	n, directly	or indirec	tly, any		
perso states	on to be lis s, list the r	ted is an a name of the	ssociated p	erson or ag dealer. It	gent of a b f more than	roker or de 1 five (5) p	aler registe persons to	ered with the be listed a	ne SEC and re associate	in the offer d/or with a ed persons E	state or		
Full Name	e (Last nam	ne first, if ir	ndividual)	.,									
Business	or Residen	ce Address	(Number a	nd Street, C	City, State, 2	Zip Code)							
Name of A	Associated	Broker or I	Dealer					· ,,					
States in '	Which Pers	on Listed F	łas Solicite	d or Intend	s to Solicit	Purchasers				,	<u>.</u>		
(Check	k "All State	s" or check	individual	States)							· · · · · · · · · · · · · · · · · · ·	. □ All :	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MM]	[MS]	[MO	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	-
[RI] Full Name	[SC] e (Last nam	[SD] ne first, if ir	(TN) ndividual)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	1
Business	or Residen	ce Address	(Number a	nd Street, C	City, State, 2	Zip Code)							
Name of A	Associated	Broker or I	Dealer										
States in '	Which Pers	on Listed F	las Solicite	d or Intend	s to Solicit	Purchasers						·	
(Checl	k "All State	s" or check	individual	States)								. □ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	
[IL]	[IN]	[IA]	[KS]	{KY]	[LA]	[ME]	[MD]	[MA]	(IM)	[MN]	[MS]	[MO	
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[MM] [UT]	[VT]	(NC) [VA]	[ND] [WA]	[HO]	[WI]	[OR] [WY]	[PA [PR	
		ne first, if in		(17)	[01]	[41]	[VA]	(WA)	[#7]		- [MI]	Į FR	<u></u>
Business	or Residen	ce Address	(Number a	nd Street, C	City, State, 2	Zip Code)	<u> </u>			<u> </u>			
Name	A:4	Dualana an I	Daalaa										
wame of	Associated	Broker or I	Jealer										
States in '	Which Pers	on Listed H	las Solicite	d or Intend	s to Solicit	Purchasers				·- ·			
(Check	k "All State	s" or check	individual	States)								□ All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID	-
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY]	[LA] [NM]	[ME]	[MD]	[MA] [ND]	[MI]	[MN]	[MS]	OM]	
[RI]	(SC)	(SD)	[NH]	[NJ] [TX]	(UT)	[YY] [TV]	[VA]	[WA]	[HO] [WV]	(WI)	[OR] [WY]	[PA [PR	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$0	\$
Equity		
☑ Common ☐ Preferred		-
Convertible Securities (including warrants)	\$0	\$(
Partnership Interests	\$0	\$(
Other (Specify)	\$ <u> </u>	\$(
Total	\$ 40,000	\$ 40,000
the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases \$ 40,000
Non-accredited Investors		\$ N/A
· Total (for filings under Rule 504 only)		-
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
Type of Security	Type of Security	Dollar Amount Sold
Rule 505	N/A	\$N/A
Regulation A	N/A	\$N/A
Rule 504	N/A	© NI/A

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

<u>N/A</u> \$

N/A

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND U	SE OF P	ROCEEDS			
4.	a. Furnish a statement of all expenses in connection with the issuance and distributi securities in this offering. Exclude amounts relating solely to organization expenses of the information may be given as subject to future contingencies. If the amount of an expense not known, furnish an estimate and check the box to the left of the estimate.	the issue	Г.			
	Transfer Agent's Fees		••		\$	0
	Printing and Engraving Costs				\$	0
	Legal Fees			×	\$	1,000
	Accounting Fees				\$	0
	Engineering Fees				\$	0
	Sales Commissions (specify finders' fees separately)					0
	Other Expenses (identify)					0
	Total					1,000
	b. Enter the difference between the aggregate offering price given in response to Part C — Que and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted proceeds to the issuer."	estion 1 d gross			s	
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be a each of the purposes shown. If the amount for any purpose is not known, furnish an estimate check the box to the left of the estimate. The total of the payments listed must equal the adjuste proceeds to the issuer set forth in response to Part C - Question 4.b above.	ate and	Payments to Officers, Directors, & Affiliates			rments To Others
	Salaries and fees	🛭 S_	39,000		s	
	Purchase of real estate	🗆 \$_			s	
	Purchase, rental or leasing and installation of machinery and equipment	□\$			s	
	Construction or leasing of plant buildings and facilities					
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another					
	issuer pursuant to a merger)	_				
	Repayment of indebtedness					
	Working capital					
	Other (specify):	_ 🗆 \$_	*** · · · · · · · · · · · · · · · · · ·		S	
				_	•	
	G.b. T. T. T.					
	Column Totals	•				
	Total Payments Listed (column totals added)		⊠ \$		39,000	
TL	D. FEDERAL SIGNATURE te issuer has duly caused this notice to be signed by the undersigned duly authorized person. If the signed by the undersigned duly authorized person.	L:	is Ciled and a T) l .	505 A	Callaudes
sigi	mature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of R	e Commi	ssion, upon writ			
	signature (Print or Type)		Date	, _		
	OBIBUCKS CORPORATION Inter of Signer (Print or Type) Title of Signer (Print or Type)		1//	2	- , :	2007
	ivid J. Barram Chairman of the Board and Secretary					
	Intentional misstatements or omissions of fact constitute federal criminal	violatio	ns. (See 18 U.	S.C.	1001	.)

END